## COMBINED DECLARATION AND POWER OF ATTORNEY FOR UTILITY ORDESIGNPATENT APPLICATION (37 CFR 1.63)

Declaration
Submitted
With Initial
Filing

OR

Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number First Named Invantor		300566	
		Rocco E. ROSSINNI et al.	
co	MPL	ETE IF KNOWN	1
Application Number	Not	:	
Filing Date	Her	ewith	:
Group Art Unit	Not	yet known	
Examiner Name	Not	yet known	

As a below named inver	ntor, I hareby declare the	at:			
My residence, post office	address, and citizenship a	are as stated below next to	my name.		. [
I believe I am the original, fire	at and sole inventor (if only on at matter which is claimed an	ne name is listed below) or an o d for which a patent is sought o	riginal, first and join in the Invention cot	nt inventor (if plurat	names
SYSTEMS AND M DIAGNOSTIC DAT	ETHODS FOR DELI	VERING AND GATHE	ERING MEDI	CAL	: 
the specification of which	(Title of II	he Invention)			
					,
OR was filed on (MM/DD/	mm)	as United States App	dication Number or	PCT International	:
Application Number		was amended on (MM/DD/YY		· .	opticable).
I hereby state that I have revie specifically referred to above. I acknowledge the duty to disc		handah ee wikitataaka at laha	in 37 CFR 1.56. inc	duding for continua	don-in-part
applications, material informati international filing date of the c	on which became available b continuation-in-part application	Jr CEMPELL FIRE HILLIER GRACO OL THO DE-	-		:
I hareby claim foreign priority to breeders rights certificate(s), States of America, listed below breeder's rights certificate(s), claimed.	penefits under 35 U.S.C. 119( or 365(a) of any PCT interna	a)-(d) or (f), or 365(b) of any for ational application which design	selen analication's	) for patient, invento application on which	n's or plant hipriority is
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY) Country	Priority Not Claimed	Certified Copy YES	Attached? NO
		,			
I nereby appoint the Faeg the patent application idea therewith, including full po	ANNEA SHOVE AND TO VEHICL	s and agents associated water all business in the Pater tution, and revocation.	ith <u>Customer Ni</u> nt and Trademan	umber 25784 to c Office connecte	prosecute ed:

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## **DECLARATION** — Utility or Design Patent Application Direct all correspondence to: Customer Number 25764 Correspondance address below or Bar Code Label Faegre & Benson LLP 2200 Wells Fargo Center, 90 South Seventh Street Address 55402-3901 MN Minneapolis ZJP State City 812.766.1600 612.766.7000 **United States** I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. A petition has been filed for this unsigned inventor NAME OF SOLE OR FIRST INVENTOR: ROSSINNI Family Name Rocco E. Given Name or Surname (first and middle (if any)) 2/20/04 Inventor's Date Signature US US MN St. Paul Citizenship State Country Residence: City 2377 Roselawn Avenue West Mailing Address US 55113 MN St. Paul Country **State** City A petition has been filed for this unsigned inventor NAME OF SECOND INVENTOR: Family Name James A. Given Name or Surname (first and middle [if any) Inventor's Date Signature บธ US MN Coon Rapids Cltizenship Country State Residence: City 10916 Flora Street NW Mailing Address US 55433 MN Coon Rapids

[Page 2 of 3]

State

Zlp

Country

	I				
NAME OF THIRD INVENTOR:	A petition has	been filed fo	r this unsigne	d inventor	F _
Given Name Richard (first and middle [if any])		Family Name FEARS or Surname			
Inventor's Signature Turken #	enn_		Date 20	e tel go	<u>/</u> :
Moundaview	MN	US	\$	us /	:
Residence: City	State	c	ountry	Citizenship	<del></del>
8322 Knollwood Drive					:
Mailing Address					
Moundsview	MN	55	5112	us	
City	State	Zi	p	Country	
NAME OF FOURTH INVENTOR:	A petition has	been filed for	or this unsign	ed inventor	<u> </u>
Given Name Timothy (first and middle [if any])		or Surname			
Inventor's Signature	977		Date	26 FEBO	4
Arden Hills	MN	Ų	IS	AU	:
Residence: City State			ountry	Citizenship	<u> </u>
1390 Indian Oaks Court					:
Malling Address					<del></del>
St. Paul	MN	5	55112	US	; :
City State			Zip	Country	<del>-                                    </del>
NAME OF FIFTH INVENTOR:	A petition ha	s been filed	for this unsign	ned inventor	<u>.</u>
Given Name Firass (first and middle [if any])	7/	Family or Sur		HADEH	
Inventor's	2		Date	2/26/20	04
Signature  Maple Grove	MN		us	Syrian .	
Residence: City	State		Country	Citizenship	<u> </u>
					:
9005 Garland Avenue					
Mailing Address	MN		55311	us	;
Maple Grove	State		Zip	Country	<del>!</del>
City					-

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